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First Named Inventor	SRINIVASAN et al.
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(37 CFR 1.63) Declaration OR Submitted with Initial

Declaration Submitted after initial Filing (surcharge (37 CFR 1.18 (a)) required)

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<u>-</u>	SRINIVASAN et al.	*
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	11/12/2003	
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As the below named Inventor, I her	eby declare that:						
My residence, mailing address, and ci	•	ow next to my name.					
I believe I am the original and first invo			h a cutent la coun	bt on the lovestics entitled:			
I believe t am the original and tirst invi	suror of the snotest matter v	August is distinged still fol Augus	21 2 p.206111 /4 4000	TR Off the mireman chinese.			
SYSTEM AND METHOD FOR PROVIDING A CREDIT ACCOUNT FOR DEBT RECOVERY							
	(Title of the l	nvention)					
the specification of which	•	•					
is sitached hereto							
OR was filed on (MM/DD/YYYY)		. as United States A	ppi cittion Number	or PCT International			
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Application Number	and was amend	åd on (MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.FR 1.56, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, fisted below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
Halling(a)		(Williams ( ) ) )					
Additional foreign application nur	mbers are listed on a supple	mental priority data sheet F	TO/SB/02B attack	hed hereto:			

(Page 1 of4)

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#### **DECLARATION** — Utility or Design Patent Application **Customer Number** Direct all correspondence to: 35856 QR Correspondence address below or Bar Code Label Name Address City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name Krishnakumar Family Name (first and middle [if ony]) or Sumame inventor's Signature Date India Thiruvanmiyur U.S. Valmiki Nagar Residence: City Cîtizenship Country A 307, "Manasarovar" Old # 19, III Seaward Mailing Address 600 041 Valmiki Nagar Thiruvanmiyur India City State Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor <sub>Given Name</sub> Brian F. Stone Family Name (first and middle [if any]) or Sumeme Inventor's Signature Date USA GA US Norcross Residence: City State Citizenship Country 5315 Spaiding Bridge Ct. **Mailing Address** 30092 Norcross GA USA City Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto,

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#### **DECLARATION** — Utility or Design Patent Application Customer Number 35856 Correspondence address below Direct all correspondence to: OR or Bar Code Label Name Address ZIP City State Country Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name Krishnakumar Srinivasan Family Name (first and middle [if any]) or Sumame Inventor's Signature Thiruvanmiyur India Indian Valmiki Nagar Citizenship Residence: City Country A 307, "Manasarovar" Old # 19, III Seaward Malling Address 600 041 Thiruvanmiyur India Valmiki Nagar ZIP Country City A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Given Name Brian F. Stone Family Name (first and middle [if any]) or Sumame Signature USA GA บร Norcross Citizenship State Сочпату Residence: City 5315 Spalding Bridge Ct. Mailing Address 30092 USA ĢΑ Norcross ZIP Country State City supplemental Additional Inventor(s) sheal(s) PTO/SB/02A attached hereto. Additional inventors are being named on the

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ADDITIONAL INVENTOR(S) Supplemental Sheet DECLARATION A petition has been filled for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle (if eny) Pendleton Mark R. Nov. 12, 2003 Inventor's Date Signature Citizenship US Country US Atlanta Georgia Residence: City 2073 Palifox Dr., N.E. Mailing Address Malling Address State Georgia 30307 US Atlanta Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle (if any) Date inventor's Signature Citizenship State Country Residence: City Mailing Address Mailing Address State Zip Country City Name of Additional Joint Inventor, if any: A patition has been "lied for this unsigned inventor Family Name of Sumame Given Name (first and middle (if any) inventor's Date Signature Cittzenship Country State Residence: City Malling Address Mailing Address

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to tangle by the USPTO to process) an application. Continentating its governed by 39 M.3.C. 122 and 37 CPK 1.19, This collection is estimated to safe at models to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will very depending upon the included case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bursen, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Dependent of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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### POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

Application Number	10/706,470
Filing Date	November 12, 2003
First Named Inventor	SRINIVASAN, K.
Title	STEM AND NETHOD FOR PROVIDING A CREDIT ACCOUNT FIR DEBT RECOVERY
Group Art Unit	
Examiner Name	
Attorney Docket Number	03001.1040

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## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	10/706,470
Filing Date	November 12, 2003
First Named Inventor	SRINIVASAN, K.
Title	SYSTEM AND METHOD FOR PROVIDING A CREEKT ACCOUNT FOR DEET RECOVERY
Group Art Unit	
Examiner Name	
Athrony Cacket Number	03001 1040

Date  March 19,2004  OTE: Signatures of all the inventors or assigness of record of the entire interest or their representative(a) are required. Submit multiple ims if more than one algorithms is required, see below.	l hereby ap	point:							
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Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enolosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Krishnakumar Srinivasan  Signature  Dato  March 19, 2 2004  OTE: Signatures of all the Inventors or assignees of record of the entire Interest or their representative(s) are required. Submit multiple times if more than one signature is required, see below?	am the:					I I dx	<u> </u>		
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information united it display a valid OMB control number. & TRANSMOO 10/706,470 Application Number November 12, 2003 Filing Date SRINIVAS<u>AN, K.</u> First Named Inventor POWER OF ATTORNEY OR Title **AUTHORIZATION OF AGENT** Group Art Unit Examiner Name 03001.1040 Attorney Docket Number I hereby appoint: Place Customer Number Bar Code 35856 Practitioners at Customer Number Lahel here Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected the swith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer OR Number Bar Code Practitioners at Customer Number |35856 Label here **O**R Firm or Individual Namo Address Address Zip State City Country Fax Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISB/96). SIGNATURE of Applicant or Assignee of Record Mark R. Pendleton Name Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will very depending upon; he needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. Total of 3 forms are submitted.

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#### 40 SRINIVASAN et al. First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION 10/706,470 Application Number (37 CFR 1.63) 11/12/2003 Filing Date Declaration Declaration OR Submitted after Initial Submitted Art Unit Filing (surcharge (37 CFR 1.16 (e)) required) with Initial Filing Examiner Name

As the below named inventor, I here	As the below named inventor, I hereby doclare that:						
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#### **DECLARATION** — Utility or Design Patent Application Customer Number Direct all correspondence to: 35856 OR or Bar Code Label Correspondence address below Name Address City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name Krishnakumar Srin vasan Family Name (first and middle [if any]) or Sumame **Inventor's** Signature Date Valmiki Nagar Thiruvanmiyur India U.S. Residence: City State Country Citizenship A 307, "Manasarovar" Old # 19, III Seaward Maining Address Valmiki Nagar Thiruvanmiyur

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